

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/097,791	06/16/98	435	1643	9465-005-999

APPLICANT

MICHAEL T. BOYCE-JACINO, FINKSBURG, MD; MIRIAM B. ADDELSTON, BALTIMORE, MD; STEVEN R. HEAD, MANCHESTER, MD.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

*none AM*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

*none AM*

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

*none AM*

FOREIGN FILING LICENSE GRANTED 06/30/98

\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 8	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Initials <i>AM</i> Initials					

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TITLE

POLYMERASE SIGNALING ASSAY

FILING FEE RECEIVED  \$570	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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